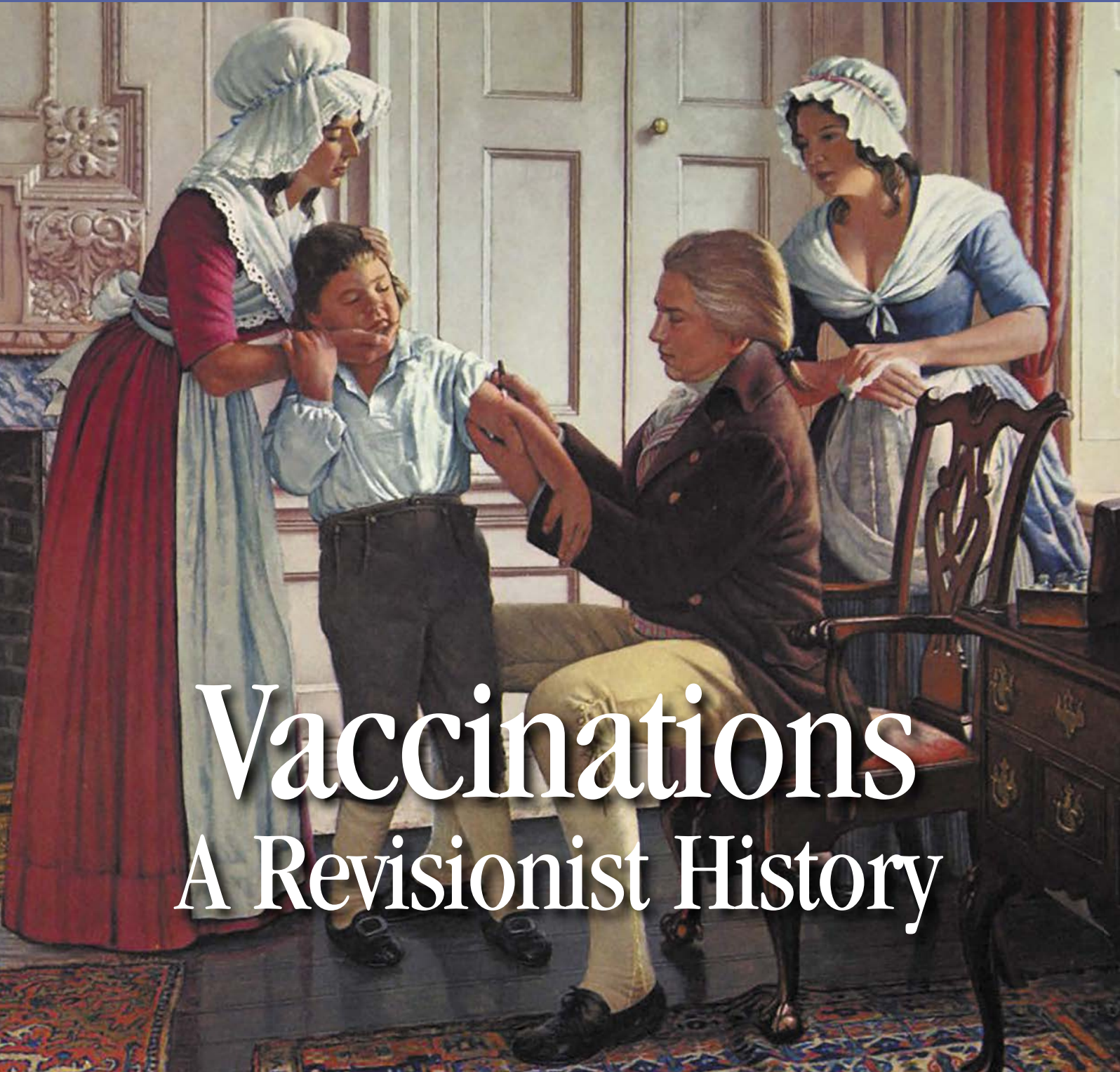


Bringing History Into Accord With the Facts in the Tradition of Dr. Harry Elmer Barnes

THE BARNES REVIEW

A JOURNAL OF POLITICALLY INCORRECT HISTORY

VOLUME XXVII NUMBER 4 • JULY / AUGUST 2021 • WWW.BARNESREVIEW.COM



Vaccinations A Revisionist History

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PERSONAL FROM THE EDITOR

A REVISIONIST LOOK AT VACCINES

For the last year and a half, we have all been barraged with contradictory statements from every side about “Covid-19” and related issues, including vaccines. We’ve heard: One mask. Two masks. Three masks. No masks. Masks stop you from getting sick. Masks won’t stop you from getting sick. Masks can make you sick. The virus came from horseshoe bats purchased in a wet market in China. It escaped from a Chinese biolab manipulating coronaviruses. It’s a creation of the U.S. military. The virus does not even really exist. Dr. Anthony Fauci is a “virus god.” Fauci was wrong about almost everything. Respirators saved people. Respirators killed people. Covid-19 is the greatest threat to humanity in a century. Covid-19 is like a severe seasonal flu. Hydroxychloroquine doesn’t work. Hydroxychloroquine does work. Vaccines are safe for everyone. Vaccines can pose a danger and so on.

It’s mind-boggling. About half the statements above are true, about half false and the rest somewhere in between. One thing we do know is that many people we talked to didn’t know much about the history of vaccines. Thankfully, we have an article—written back in 2012 but until this issue never before published—by former radio host, health guru, historian and author Tom Valentine, that takes us on a whirlwind history tour of vaccines. Where did vaccines begin? Who made mass inoculations possible? Did vaccines completely wipe out multiple epidemic diseases? Has a greater, hidden danger from vaccines been concealed from us? These and other intriguing questions are explored.

Inside you will also find a collection of eclectic articles on even more riveting topics, including the tragic saga of WWII Soviet Gen. Andrey Vlasov. The author explains why Vlasov defected to the German side and then decided to raise an army of Russian volunteers to help Adolf Hitler defeat Josef Stalin on the Eastern Front. This is the story of a courageous man who understood the dangers of Bolshevism and sacrificed his life trying to defeat it.

Also in this issue are articles on: why the Spanish-American War—not World War I—was the true dawn of a seemingly unending age of U.S. imperialist ventures; the true horrors of Reconstruction for the people of Dixie; the life of a U.S. military scout on the High Plains in the 1880s; the thoughts of African slaves about their lives in America; Britain’s “Bomber” Harris and whether he should be considered a war criminal; the “official” martyrdom of WWI spy Edith Cavell; and one on the Patriotes rebellion waged in 1830’s Lower Canada revealing the real motives of the revolution’s leaders.

After reading through this issue, please take advantage of the TBR subscription renewal offer to be found among the color pages wrapping this issue. We have a great free gift book edited by Alexander Jacob called *Jewish Austria* we’ll send when you renew. You might find it enlightening to read about the parallels between what is happening in America right now and what occurred in Austria at the tail end of the 19th century.

—PAUL ANGEL, *Executive Editor*

A Revisionist History of Vaccinations

By Tom Valentine

The notion of vaccination to protect an individual against disease-causing germs was invented and practiced before mankind knew anything about germs. It started early in the 1700s when somebody got the idea or hypothesis that mixing the blood of a smallpox or plague survivor with an uninfected person might somehow pass along some kind of protection. They would make incisions in the hand or arm and, much like the “blood brothers” made in the movies, they would press the wounds together.

History says Edward Jenner conceived of vaccinating people against the dread smallpox (a viral infection), by pricking them with a cowpox-tainted instrument in 1796. Mankind didn’t yet have the germ theory of disease, let alone know anything about viruses, until the time of Antoine Bechamp, Louis Pasteur and Martinus Beijerinck, about a century later. Koch’s postulates (the basis of the germ theory) weren’t put forth until 1882. So, Jenner developed a vaccination procedure before we knew anything of the immune system and infectious pathogens.

Until the invention of the electron microscope in the 1930s, scientists



Tom Valentine is shown leading the Pledge of Allegiance at a free speech conference in D.C.

knew virtually nothing about viruses.

The cowpox inoculation against smallpox first conceived by Jenner is a good example of doing without knowing. Truth be told, we are still “doing” a lot more than we “know” when it comes to immunization programs today.

However, we certainly know more than they did back in Jenner’s time, or Pasteur’s time, or even the times of Jonas Salk in the 1950s, when polio was allegedly eradicated by vaccines.

Today there are two polarized camps—the established medicine,

public health policy, pro-vaccination camp and the vaccination-hesitant, freedom-of-choice camp.

So, what can we believe? We shall strive to deal with this issue rationally. First, does experience validate the theory? Let’s look at the record.

Our medical establishment points to the smallpox record as convincing. We are told that, up until Benjamin Rubin invented the “bifurcated vaccination needle” in the 1960s, a device allowing vaccinations in primitive areas of the world, the record indicated at least 2 million people died of smallpox every year worldwide. By 1980, the World Health Organization proclaimed that smallpox had been eradicated. This appears very impressive, but does not consider all the variables involved.

We find in the book *Vaccination: The Silent Killer* by Ida Honoroff and Eleanor McBean, the following:

In 1796, Edward Jenner started his cowpox vaccination craze, which increased the smallpox epidemics to such an extent that the disease became endemic and, from 1837 to 1839, there was the sweeping epidemic that killed 22,081 people. In spite of this absolute proof of the deadly effects of vaccination, the vaccine promoters managed to get a compulsory vaccination law passed in England in 1853. The epidemics then increased



The First Vaccination

This illustration by Robert Thom shows Edward Jenner administering the first vaccine in 1796. Jenner conceived of vaccinating people against the dreaded viral smallpox by pricking them with a cowpox-tainted instrument. This is long before mankind had the technology to confirm that viruses, and bacteria, for that matter, even existed, as they were invisible to the human eye without a microscope.

to such an extent that, from 1870 to 1872, there was the worst smallpox epidemic of all time, which killed 44,480 people. The English people fought the vaccination promoters until they were able to abolish compulsory vaccination in England in 1948. They have since had no [smallpox] epidemics.

Isn't that a fascinating, if oversimplified, version of medical history? Not only was man doing more than he knew by vaccinating himself against viral organisms he didn't know existed, but he also introduced "vaccination promoters" and "compulsory laws" into the equation.

Is it any wonder that some have said our human behavior is capable of boggling even the minds of angels?

The late Dr. Robert Mendelsohn, "called the people's doctor," provided

this look at the historical record regarding smallpox, which, we are told with a great deal of media hype, is a disease that has been utterly eradicated:

Did you know that several years after the first smallpox vaccine was introduced into the Philippines (it was first given in 1910) and after 95% of the population—8 million people—had been given 24.5 million doses of vaccine, the Philippines experienced its worst smallpox epidemic in history?

To add another wrinkle of dark humor to this tale of human folly, a letter to the editor in *The Lancet* (September 28, 1996) featured a photograph of a headstone dating back to 1788. The letter and photo were headlined: "An old malpractice claim." The tombstone read as follows: "In Memory of

Peleg, son of Thomas & Mary Conklin, who died of the smallpox by inoculation, January 27, 1788; aged 17 years."

Not only is the contended date, 1788, interesting in that it precedes Jenner by eight years, but the letter writer in *The Lancet* pointed out that "medical malpractice claims are not new in the New World." Neither are claims that vaccination caused the untimely death of a youngster.

Apparently, the facts about disease eradication have been misrepresented.

The story of the lessening of specific diseases is not cut and dried at all. There are variables and multiple factors—not merely vaccinations—to take into account when analyzing the record.

For example, paralytic polio was a scourge prior to the 1950s (polio vaccines first arrived in 1955) and

probably everyone in my generation can remember the March of Dimes campaigns with Eleanor Roosevelt leading the way. Well, today the scourge of “natural paralytic polio” has “vanished” due to unknown factors, but perhaps due to what molecular biologists today call “genetic drift” in the virus.

Epidemiological studies show that polio mortality declined by 82% prior to 1956 in England and Wales. The same pattern emerged in France. The vaccine had nothing to do with any of it. After 10 years of polio vaccine availability (1966), the overall statistics indicated that polio had returned to where it had been in the 1920s. And today it is argued that the only source of paralytic polio is the polio vaccine.

Regardless of why polio is no longer seen as a major threat, the history of the polio vaccines is one of horrific consequences few Americans know anything about.

In his fascinating book *Mary, Ferrie & the Monkey Virus: The Story of an Underground Medical Laboratory*, investigator-author Edward Haslam relates the dawning of the polio vaccine succinctly. With permission, we reprint his brief description:

Today, many Americans do not remember what a terrible curse the polio epidemic was upon the land. At its crest in the early 1950s, more than 33,000 Americans fell crippled or died slow, terrible deaths from polio each year. Most were children. The word “polio” struck fear into the hearts of parents across America. It was a casually transmitted virus that first infected the lining of the intestines, then the bloodstream, and finally the nervous system, where it destroyed the victim’s brainstem. The difference between crippled and dead was determined by the extent of the damage to the brainstem.

Cavernous hospital wards full of hideous-looking machines called “iron lungs” awaited patients who became too weak to breathe for themselves.

President Franklin Roosevelt himself was crippled by polio before he entered the White House.

The search for a polio vaccine became a national scientific effort supported by the most powerful political forces in the land. The problem was this: Polio was caused by a virus, not a bacterium, and viruses do not respond to antibiotics. So, despite the spectacular success of antibiotics introduced to the American clinical scene in 1942, the medical community was powerless to stop this virus from crippling and killing.

A New York City lawyer close to President Roosevelt organized the March of Dimes and collected millions of dollars in coins from

Today, many Americans do not remember what a curse the polio epidemic was.

grade school children across the country to finance the research effort. The progress was encouraging. By the early 1950s, American scientist Jonas Salk came forward with a brave new idea to eliminate all three strains of polio at once: Grow the polioviruses in the lab, kill them, then inject healthy children with the dead viruses. The dead viruses would not be able to reproduce, so they would not harm the children, but their immune systems would detect the presence of the invading viruses and would rally to defend the body, producing a hefty supply of antibodies in the process.

Then the children’s fully armed immune systems would be ready to repel any live poliovirus that attacked them in the future. His trials in 1953 and 1954 were successful. Optimism about Salk’s vaccine reached its peak.

Five laboratories began producing the vaccine from a procedure Salk designed, and accumulated a large enough supply for a mass inoculation, which was scheduled as a celebration for Franklin Roosevelt’s birthday. The results of years of research, millions of dollars of investment, and the fate of thousands of crippled children, [all] were ready for the most publicized and anticipated event in the history of medicine.

At the 11th hour, a bacteriologist at NIH was told to safety-test the new polio vaccine. Her name was Bernice Eddy. When she injected the vaccine into her monkeys, they fell paralyzed in their cages. Eddy realized that the virus in the vaccine was not dead as promised, but still alive and ready to multiply. It was time to sound the alarm. She sent pictures of the paralyzed monkeys to NIH’s management and warned them of the upcoming tragedy. A debate erupted in the corridors of power: Was the polio vaccine really ready? Should the mass inoculation proceed on schedule?

A handful of prominent doctors across the country stepped into the fray to throw the weight of their reputations on the side of the vaccine. One of these doctors was Mary Sherman’s boss, Dr. Alton Ochsner.

[Mary Sherman is the Mary in the book title, and Alton Ochsner was one of the most prominent doctors in New Orleans where the secret monkey virus lab exposed by this book was located.—Ed.]

To demonstrate his conviction that the vaccine was really ready, Dr. Ochsner inoculated his own grandchildren with it.

The mass inoculation proceeded on schedule [1955—Ed.]. Within days, children fell sick from polio. Some were crippled, some died. Estimates vary dramatically. [The full truth will never be known.—Ed.] Ochsner’s grandson died. His granddaughter contracted polio but survived.

An enormous lawsuit erupted. Heads rolled everywhere. The secretary of health, education and

welfare, Oveta Hobby, stepped down. The director of the National Institute of Health (NIH), Dr. William Sebrell, resigned. It was the biggest fiasco in medical history.

A second, safer vaccine, developed by Albert Sabin, was deployed in 1957. It used a weakened live virus instead of a dead virus. It worked. Polio was history; the future was safe—or so it seemed.

Before continuing with this historical information, let's glance at a part of the factual aftermath of the polio vaccine debacle.

As a testimony to what is not known, lawyers have made big money representing victims of the polio vaccine, and we witnessed the two great names in polio vaccine—Salk and Sabin—pointing fingers at each other. First, Dr. Sabin attacked the Salk vaccine, then, later, the son of Jonas Salk, Dr. Darrell Salk, testified on behalf of a man in Wichita, Kansas who won a jury award of \$10 million in 1982 because the Sabin oral vaccine Orimune, manufactured by Lederle Laboratories, caused his paralytic polio.

In case you didn't know about this, the father of an infant girl who was immunized with Sabin's oral vaccine contracted "irreversible bulbar poliomyelitis," paralyzing his lungs 10 or 12 days after the infant's immunization. Lederle was found negligent in not pointing out that non-immunized people faced an increased risk of contracting polio by coming into contact with anyone receiving the oral vaccine.

Most of this information was played down, and few Americans know the story of the polio vaccine debacle. Instead, the public has been brainwashed to believe that both the Salk and Sabin vaccines were, indeed, wonder drugs of the modern era.

Our history of vaccines does not end with polio, however. Thanks to Haslam's investigative work into the secret "monkey virus labs" operated by the U.S. government, there is much more vaccine history unfolding.

According to the book, in the af-



Salk and the Monkey Virus

Dr. Jonas E. Salk, who discovered the polio vaccine, reads with his wife and three boys in Ann Arbor, Michigan, April 11, 1955. The family was photographed the night before an announcement insisting the vaccine was effective. Salk's boys were among the first to receive the experimental vaccine. Shown from left to right are five-year-old Jonathan, Mrs. Donna Salk, 11-year-old Peter, Dr. Salk and eight-year-old Darrell. Salk had an innovative concept: Grow the polioviruses in the lab, kill them, then inject healthy people (in this case mostly children) with the dead viruses. The body would recognize the virus and begin to make antibodies to fight any invading polio virus. Bernice Eddy was told to safety-test the vaccine. When she injected the vaccine into her monkey test subjects, all of them quickly became paralyzed.

termath of the debacle, Eddy was taken off of polio research and transferred to the influenza section by the thankless NIH management. She shared her frustrations with a small group of women scientists who ate brown-bag lunches on the steps of one of the big labs. There, Eddy met a tenacious scientist named Sarah Stewart, who was waging her own battle against the official paradigms of bureaucratic medicine. Eddy and Stewart became close friends.

Sarah Stewart's name remains virtually unknown today despite her huge contribution to modern medicine. Not only did she prove that some cancers were caused by viruses, but subsequent research on the virus she discovered led to the discovery of DNA recombination, one of the most powerful tools in medical research today.

Stewart was raised in the fertile Rio Grande Valley on the Mexican border. Her educational odyssey ranged from the New Mexico Agricultural College in 1927 to getting a Ph.D. in bacteriology from the University of Chicago in 1939. Next, Stewart went to work for the NIH as a bacteriologist for five years. Believing that having a Ph.D. instead of an M.D. was holding back her career advancement, she entered Georgetown Medical School and earned her medical degree in 1947. Then she joined the National Cancer Institute until reassigned to the U.S. Public Health Service in 1960.

From the beginning, Stewart promoted the idea that cancer was caused by viruses. Due to this, she was not well accepted by the NIH or National Cancer Institute (NCI) staffs, who described her as "an eccentric lady" determined to prove her theory was right. "No one believed her." Finally, she was given access to an NCI laboratory in Bethesda where she could try to prove her theories. In 1953, she almost succeeded, but her work was not accepted by the ruling crowd at NIH. They found her methods sloppy and objected to the fact that she did not culture her viruses. So, in 1956,

her lunch partner Eddy showed Stewart how to grow her viruses in a culture of mouse cells. She now had all the ingredients she needed and began a series of experiments that are called "classic" by modern NIH researchers.

[I find it more than a little curious that the cancer establishment of the day was apparently not interested in the viral theory of cancer since this would naturally lead to the development and promotion of a cancer vaccine, which seems to be precisely what our medical monopoly would desire. This previously little-known history is shooting down a previous thesis of mine, published in 1977, in which I argued that the cancer estab-

The vaccine's manufacturers had grown their polioviruses on monkey kidneys.

lishment was trying desperately to find a cancer-causing virus in order to develop a lucrative vaccine program. I am chagrined, but edified.—TV.]

As her work progressed, she realized she stood on the edge of an extremely important discovery, and became very protective of her techniques. In staff presentations, she would bewilder NIH pathologists by showing them slides of things they had never seen before. Then, when they asked how she produced her results, she would giggle and say, "It's a secret." To quote her supervisor Alan Rabson, "She drove everybody crazy." One of her procedural anomalies was that she never did control groups, saying, "They only confuse you."

In 1957 Stewart and Eddy discovered the polyoma virus, which produced several types of cancer in a va-

riety of small mammals. Her discovery officially threw open the doors of cancer virology. As Rabson phrased it: "Suddenly the whole place exploded just after Sarah found polyoma." It was the beginning of a new era of hope. But it raised some dark questions about earlier deeds. Before long, Yale's laboratory discovered that the polyoma virus that had produced the cancer in Stewart's mice and hamsters turned out to be virtually identical to Simian Virus No. 40 (SV-40), a monkey virus that caused cancer.

In June 1959, Eddy, who was still officially assigned to the flu vaccine project, began thinking about the poliovirus again. This time she was worried about something much deeper than polio. The vaccine's manufacturers had grown their polioviruses on the kidneys of monkeys. When they removed the poliovirus from the monkeys' kidneys, they also removed an unknown number of other monkey viruses. The more they looked, the more they found.

The medical science of the day knew little about the behavior or consequences of these monkey viruses. But times were changing. Confronted with mounting evidence that some monkey viruses caused cancer, Eddy grew suspicious of the polio vaccine and asked the excruciating question: Had they inoculated an entire generation of Americans with cancer-causing monkey viruses?

She conducted her research quietly, without alerting her NIH supervisors.

In October 1960, Eddy gave a talk to the Cancer Society in New York and, without warning NIH in advance, announced she had examined cells from the monkey kidneys in which the poliovirus was grown and had found they were infected with cancer-causing viruses. Her inference was clear: There were cancer-causing monkey viruses in the polio vaccine.

This was tantamount to forecasting an epidemic of cancer in America. When word got back to her NIH bosses, they exploded in anger. When the cussing stopped, they crushed



Fauci, Trump and Covid-19

Unfortunately for Donald Trump, during his administration, a novel coronavirus (SARS-CoV-2) evidently escaped from a Chinese bio-lab in Wuhan and eventually infected millions of Americans. Suddenly, the health of the American people became a political weapon Democrats used to smash the president. Dr. Anthony Fauci (right), head of the National Institute of Allergy and Infectious Diseases, became the front man for the administration's response. The problem was, Dr. Fauci—an alleged expert on infectious diseases—refused to listen to the president who was, surprisingly, right more often than Fauci was. But the damage was done. The left-wing news media successfully brainwashed a huge portion of the populace to believe that an “incompetent” President Trump was solely responsible for every death and Fauci was a virus god.

Eddy professionally. Any mention of cancer-causing viruses in the polio vaccine was not welcomed by NIH. They took away her lab, destroyed her animals, put her under a gag order, prevented her from attending professional meetings and delayed the publication of her scientific papers.

In the words of Edward Shorter, author of *The Health Century*: “Her treatment became a scandal within the scientific community.”

Later it became the subject of a congressional inquiry.

A viral specialist named Laura McClelland, working for vaccine developer Maurice Hilleman in Philadelphia, found similar problems in the polio vaccine. The essence of the problem was that SV-40 did not cause

cancer in its natural host, an Asian monkey. But what would it do in another primate that had never been exposed to it—one whose immune system had not been sensitized to SV-40? Like Stewart and Eddy, Hilleman knew the population of laboratory animals was hopelessly cross-infected with all sorts of viruses. Monkeys from different continents were frequently caged together.

It would be impossible to guarantee that any monkey in the American laboratory population had not been exposed to SV-40 at some point in the past. Hilleman needed clean monkeys, caught in the wild. To avoid any last-minute contamination, he completely bypassed the commercial animal-importing network. He arranged to

have a group of green monkeys (*Chlorocebus pygerythrus*) caught in Africa and sent to Philadelphia via Madrid, an airport that normally did not handle any animal traffic. His own drivers picked up the clean monkeys at the Philadelphia airport and brought them directly to the lab.

When injected with SV-40, these clean green monkeys developed cancer. Hilleman announced these findings at a medical conference in Copenhagen. But it was not news to the NIH staffers in the audience. The insiders already knew there was a cancer-causing virus in the polio vaccine, but they had not announced it. It was the public that did not know. Should the public have been told?

It is difficult for us who have seen

the enormous press coverage of AIDS in the 1990s to understand the indolent response of the 1960s press on this subject. Was it really their job to prevent public panic? Did they cower in the face of scientific authority? Were they lazy? Or stupid? Or arrogant? Or were they told not to run the story by political and economic forces? It is hard to say, but there is evidence the word leaked out anyway.

In the spring of 1961, one of Eddy's co-workers published a medical article that said there was live SV-40 in the polio vaccine. Eddy herself confirmed that the SV-40 monkey virus was causing cancer in hamsters as well as monkeys, proving that it was capable of crossing the species barrier. But she was not allowed to release the information until a year later. NIH notified the U.S. surgeon general that "future polio vaccines [would] be free of SV-40." On July 26, 1961, *The New York Times* reported two vaccine manufacturers were withdrawing their polio vaccines "until they can eliminate a monkey virus."

The article ran on page 33 with no mention of cancer. Seven months later, a second article in the *Times* mentioned the possibility of cancer in the polio vaccine. That article ran on page 27. The story died there, and the specter of an approaching epidemic of cancer silently rose on the horizon.

On the heels of the polio fiasco, the medical hierarchy feared the judgment of the masses. Their ability to destroy a painstakingly constructed scientific career overnight had been clearly proven. Another spate of news might shatter the public's confidence in vaccines and orthodox medicine altogether.

Where would we be then? Where would the public health establishment be then? As SV-40 discoverer Maurice Hilleman put it, the government kept the contamination of the polio vaccine secret to "avoid public hysteria."

We are reminded of the scene in *Frankenstein* when a crowd of superstitious villagers gathered at the castle gate, angrily waving their pitch-

forks and torches in the air, demanding to know what evil was going on inside the doctor's laboratory. To quote the words of polio vaccine developer Albert Sabin: "I think to release certain information prematurely is not a public service. There's too much scaring the public unnecessarily. 'Oh, your children were injected with a cancer virus' and all that. That's not very good."

"Prematurely"? Hadn't the mass inoculations already taken place? Had not several top scientists, using carefully controlled experiments, estab-

Was Dr. Eddy's prediction of a cancer epidemic spurred by vaccinations accurate?

lished that the problem was real? Hadn't they announced the results to their peers? "Unnecessarily"? Wasn't there still time to try to do something about it? Shouldn't someone have at least tried? Sabin might as well have said: "I prefer my tombstone read 'The vanquisher of polio,' and not 'The father of the great cancer epidemic.'"

His attempt to hide behind the apron of "public service" is no more than an attempt to avoid both respon-

sibility and the unpleasant experience of facing the angry public. We would all prefer not to be held accountable for our mistakes.

Says Haslam, the more important question is: Was Eddy's prediction of a cancer epidemic accurate? Did the epidemic happen?

Haslam follows that query with his own answer, and I concur—we have had an epidemic of cancer, especially "soft tissue" cancers, in the past 50 years. We have lost the war on cancer, and are continuing to see the numbers of cancer deaths go up by more than 10,000 victims every year.

If you do an Internet search for the names Bernice Eddy, Sarah Stewart or the others, you will find biographic facts and a statement about polyoma virus and cancer and virtually nothing about the huge controversies. One of the links to "polio vaccine" plagiarizes some of Haslam's exposé without citing him.

Says Haslam: "This is a sad legacy for the compulsory vaccine propaganda machine, and you won't be hearing a lot about it. My point is this: The next time you hear that vaccines have wiped out a disease, at least ask them to prove it." ♦

Note: Unfortunately, famed alternative health expert Tom Valentine, the author of this article, passed away in 2014. Sad, because we would have loved to have heard his expert opinion on the use of the Covid-19 vaccines currently being tested on an emergency-use contingency on the people of the world. As far as we know, this is the first time this article has ever been published.—Ed.

TOM VALENTINE (1935-2014) was a businessman, writer, commentator and radio host with an anti-establishment perspective. He worked with *Radio Free America* as a very popular talk show host from 1988 to 2004. He was a populist, aligning with issues from left and right ends of the political spectrum, as well as libertarianism. His main journalistic interests were unorthodox health care methods and high-level government cover-ups and crimes. Tom was the first to point out that soy products are not "health foods," and generally unfit for human consumption. His vitamin supplement company Carotec Inc., based in Naples, Florida, is still being operated by his dedicated wife and children. Carotec is known to carry only the highest-quality, well-sourced health products, researching and scrutinizing the efficacy, purity and absorbability of every product Carotec carries. See more online at www.Carotec.com or call 1-800-522-4279 toll free for more information.